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OCT 02 2014

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

SD SEC. OF STATE

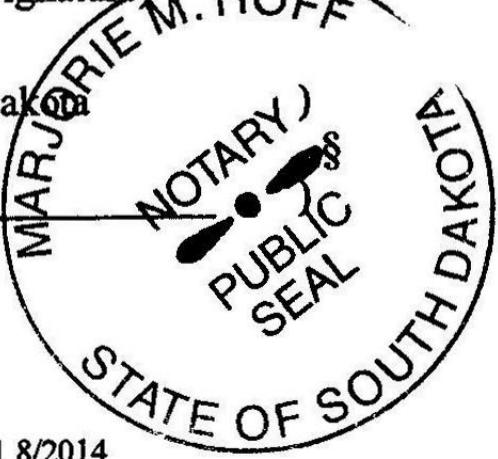
Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER	The VOLGA Tribune	
2. DATE	9-27-14	
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE
Weekly	51 (except week of Christmas)	\$49.98 / 50.90
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)		
207 KASAN AVE VOLGA SD 57071		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)		
207 KASAN AVE, POB18, VOLGA SD 57071		
6. FULL NAME OF PUBLISHER: LINDA R Schumacher		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME		COMPLETE MAILING ADDRESS
RFO News Group, Inc		Pob18, 207 Kasan AVE, VOLGA SD 57071
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		
NONE		
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS
A. TOTAL NO. COPIES (Net Press Run)		550
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.		126
2. Mail Subscription (Paid and or requested)		401
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		527
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS		0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		16
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		543
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing		7
2. Return from News Agents		0
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)		550
		550

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Linda R Schumacher
(Signature)

State of South Dakota
County of _____
(Seal)



Publisher
>Title)

Sworn to before me this 27 day of Sept, 2014
Marjorie M. Hoff
Notary Public
My commission expires: August 18, 2015